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| Number of pages with cover page: | 19 | |
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Comments:**PLEASE PROCESS THE ATTACHED.**Re: U.S. Serial No. 10/695,499
Title: MENINGOCOCCAL ANTIGENS
Applicants: Vincenzo SCARLATO et al.
Our Reference: 22300-2099101RECEIVED
OIPE/IAP

SEP 30 2005

Attached is the following:

1. Transmittal (1 page)
2. Fee Transmittal (in duplicate, 2 pages)
3. Petition for Extension of Time (1 page)
4. Revocation of Power of Attorney w/new Power of Attorney (1 page)
5. Amendment Under 37 CFR 1.111 (11 pages)
6. U.S. Patent No. 6,197,312 (first page, 1 page)
7. WO 99/31132 (first page, 1 page)

sf-1898138

SEP 29 2005

PTO/SB/21 (09-04)


Approved for use through 07/31/2008. OMB 0651-0031

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| | | | |
|--|----------------------|------------------------|--------------|
| TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i> | Application Number | 10/695,499 | |
| | Filing Date | October 28, 2003 | |
| | First Named Inventor | Vicenzo SCARLATO | |
| | Art Unit | 1845 | |
| | Examiner Name | J. Graser | |
| Total Number of Pages in This Submission | 18 | Attorney Docket Number | 223002099101 |

| ENCLOSURES (Check all that apply) | | |
|--|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate, 2 pages) <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (11 pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (1 page) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address (1 page) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. U.S. Patent No. 6,197,312 (first page, 1 page) 2. WO 99/31132 (first page, 1 page) 3. Facsimile Coversheet (not counted as part of this submission) |
| Remarks | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--|---|----------|--------|
| Firm Name | MORRISON & FOERSTER LLP | | |
| Signature |  | | |
| Printed name | Otis Littlefield | | |
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| I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below. | |
| Dated: September 29, 2005 | Signature: <u>Valerie Cohen</u> (Valerie Cohen) |

sf-2008352